Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 1 of 40

Fill in this inform					
Debtor 1	Timothy William I	Hahn			
	First Name	Middle Name	Last Name		
Debtor 2	Tammi Michelle H	lahn			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEBRAS	SKA		
Case number	21-80069				
(if known)				-	if this is an

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,539.53
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,539.53
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	65,484.35
	Your total liabilities	\$	65,484.35
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,083.22
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,080.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Vour dabts are primarily consumer dabts. Consumer dabts are those "incurred by an individual primarily for	a parcanal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

# Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 2 of 40

Debtor 1	Timothy William Hahn	<b>o</b>
	Tammi Michelle Hahn	Case number (if known) 21-80069

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,560.49

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	27,913.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	27,913.00

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 3 of 40

Fill in this in	formation to identify your case	and this filing:		
Debtor 1	Timothy William Hahn			
Debtor 2	First Name	Middle Name Last Name		
(Spouse, if filing)	Tammi Michelle Hahn First Name	Middle Name Last Name		
United States	Bankruptcy Court for the: DIST	RICT OF NEBRASKA		
Case numbe	<b>21-80069</b>			☐ Check if this is an amended filing
Official	Form 106A/B			
Sched	ule A/B: Propert	:V		12/15
In each catego think it fits bes	ry, separately list and describe item t. Be as complete and accurate as p more space is needed, attach a sepa	s. List an asset only once. If an asset fits in more than oncossible. If two married people are filing together, both are arate sheet to this form. On the top of any additional pages	e equally responsible for su	pplying correct
Part 1: Desc	ribe Each Residence, Building, Lanc	l, or Other Real Estate You Own or Have an Interest In		
1. Do you own	or have any legal or equitable inter	est in any residence, building, land, or similar property?		
■ No. Go to	D-# 0			
_	ere is the property?			
	ore to the property.			
Part 2: Desc	ribe Your Vehicles			
someone else		e interest in any vehicles, whether they are register to report it on Schedule G: Executory Contracts and Undehicles, motorcycles		Silicies you own that
			5	
3.1 Make:	Nissan	Who has an interest in the property? Check one		ed claims on Schedule D:
Model: Year:	Altima SL V6 2013	☐ Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	imate mileage: 120000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	☐ At least one of the debtors and another		
howe and n balan Clean Clean	is not in Debtors' name, ver, they make payment naintain vehicle. Loan ce is approximately \$8000. retail value: \$8875 trade in value: \$6500 with USAA.	☐ Check if this is community property (see instructions)	Unknown	Unknown
Examples:  No Yes  Add the conjugate of	Boats, trailers, motors, personal was a second was a seco	nd other recreational vehicles, other vehicles, and ratercraft, fishing vessels, snowmobiles, motorcycle account of the second o	entries for	\$0.00
	ribe Your Personal and Household or have any legal or equitable i	nterest in any of the following items?		Current value of the

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 4 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn		Case number (if kno	<sub>own)</sub> _21-80069
				portion you own? Do not deduct secured claims or exemptions.
Examp ☐ No	old goods and furnishings les: Major appliances, furniture, linens,	china, kitchenware		·
Yes.	Describe			
	Household good	ds and furnishings including elec	etronics	\$2,000.00
■ No		o, stereo, and digital equipment; compo edia players, games	uters, printers, scanners; mu	sic collections; electronic devices
Examp ■ No	bles of value les: Antiques and figurines; paintings, pother collections, memorabilia, coll Describe	orints, or other artwork; books, pictures, lectibles	or other art objects; stamp,	coin, or baseball card collections;
Examp. ■ No	nent for sports and hobbies  les: Sports, photographic, exercise, and musical instruments  Describe	d other hobby equipment; bicycles, poo	l tables, golf clubs, skis; can	oes and kayaks; carpentry tools;
■ No	ples: Pistols, rifles, shotguns, ammuniti  Describe	on, and related equipment		
□ No	ples: Everyday clothes, furs, leather co  Describe	ats, designer wear, shoes, accessories		
	Clothing			\$500.00
■ No □ Yes.	ples: Everyday jewelry, costume jewelr  Describe	y, engagement rings, wedding rings, he	eirloom jewelry, watches, ger	ns, gold, silver
Exam □ No	nrm animals ples: Dogs, cats, birds, horses  Describe			
	Cats (2) househo	old pets, no economic value		\$0.00
14. <b>Any o</b> t		ou did not already list, including any	y health aids you did not lis	st
■ No □ Yes.	Give specific information			
		from Part 3, including any entries fo		\$2,500.00

Official Form 106A/B Schedule A/B: Property page 2

# Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 5 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn	Case number (if known	21-80069
Part 4: De	escribe Your Financial Assets	<u> </u>	
	wn or have any legal or equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oples: Money you have in your wallet, in your home,	in a safe deposit box, and on hand when you file your peti	tion
	sits of money  sples: Checking, savings, or other financial accounts institutions. If you have multiple accounts with	s; certificates of deposit; shares in credit unions, brokerage n the same institution, list each.	houses, and other similar
_		Institution name:	
	17.1.	USAA Checking Account	\$57.53
	17.2.	USAA Savings Account	\$70.00
	s, mutual funds, or publicly traded stocks  ples: Bond funds, investment accounts with broker	age firms, money market accounts	
_	Institution or issuer nam	e:	
	publicly traded stock and interests in incorporate venture	ed and unincorporated businesses, including an intere	est in an LLC, partnership, and
	. Give specific information about them	% of ownership:	
Negot Non-n	nment and corporate bonds and other negotiab tiable instruments include personal checks, cashier negotiable instruments are those you cannot transfe	s' checks, promissory notes, and money orders.	
■ No □ Yes.	. Give specific information about them Issuer name:		
	ment or pension accounts  sples: Interests in IRA, ERISA, Keogh, 401(k), 403(k)	o), thrift savings accounts, or other pension or profit-sharing	g plans
Yes.	List each account separately.  Type of account:	Institution name:	
		IRA	\$30.00
Yours	ity deposits and prepayments share of all unused deposits you have made so tha oples: Agreements with landlords, prepaid rent, publ	t you may continue service or use from a company lic utilities (electric, gas, water), telecommunications compa	anies, or others
□ No ■ Yes.		Institution name or individual:	
		Security deposit in the amount of \$750-same is subject to setoff	\$0.00
_	ties (A contract for a periodic payment of money to	you, either for life or for a number of years)	
■ No □ Yes.			
		chedule A/B: Property	page

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Page 6 of 40 Document **Timothy William Hahn** Debtor 1 Case number (if known) 21-80069 Debtor 2 **Tammi Michelle Hahn** 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2020 refunds \$8841 (federal and owes state) \$7,882.00 **EIC \$959** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No
- ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Page 7 of 40 Document **Timothy William Hahn** Debtor 1 Case number (if known) 21-80069 Debtor 2 **Tammi Michelle Hahn** 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$8,039.53 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form

ı aı	Elst the Totals of Each Fait of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line 15		\$2,500.00		
58.	Part 4: Total financial assets, line 36		\$8,039.53		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$10,539.53	Copy personal property total	\$10,539.53
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$10,539.53

Official Form 106A/B Schedule A/B: Property page 5 Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Maii Document Page 8 of 40

Fill in this infor	rmation to identify your	case:		
Debtor 1	Timothy William	Hahn		
	First Name	Middle Name	Last Name	
Debtor 2	Tammi Michelle H	łahn		
(Spouse if, filing) First Name		Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEBRAS	KA	
Case number	21-80069			
(if known)				☐ Check if this is amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are	vou claiming	? Check one only	even if	vour spouse is filin	a with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Household goods and furnishings including electronics	\$2,000.00		\$2,000.00	Neb. Rev. Stat. § 25-1556(1)(c)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Neb. Rev. Stat. § 25-1556(1)(b)
Life from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
USAA Checking Account Line from Schedule A/B: 17.1	\$57.53		\$57.53	Neb. Rev. Stat. § 25-1552(1)
Elle Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
USAA Savings Account Line from Schedule A/B: 17.2	\$70.00		\$70.00	Neb. Rev. Stat. § 25-1552(1)
Elle Holli Schedule PVD. 17.2			100% of fair market value, up to any applicable statutory limit	
IRA Line from Schedule A/B: 21.1	\$30.00		\$30.00	Neb. Rev. Stat. § 25-1563.01
LINE HOLL SCHEUUIG PVD. 21.1			100% of fair market value, up to any applicable statutory limit	

# Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 9 of 40

Debte Debte			mothy William Hahn ımmi Michelle Hahn Case numb		Case number (if known)	21-80069		
	Brief description of the property and line on Schedule A/B that lists this property			urrent value of the Amount of the exemption you claim		Specific laws that allow exemption		
					by the value from nedule A/B	Check only one box for each exemption.		
2020 refunds \$8841 (federal and owes state) EIC \$959 Line from <i>Schedule A/B</i> : 28.1			\$7,882.00		\$7,882.00	Neb. Rev. Stat. § 25-1552(1)		
					100% of fair market value, up to any applicable statutory limit			
	Subj		laiming a homestead exen adjustment on 4/01/22 and	•	. ,		ed on or after the date of adjustmer	t.)
I	□ `	Yes.	Did you acquire the property	covered by	the exemption wi	ithin 1,	215 days before you filed this case	
	- 1		No					
	I		Yes					

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 10 of 40

Fill in this inform	nation to identify your	case:		
Debtor 1	Timothy William	Hahn		
	First Name	Middle Name	Last Name	
Debtor 2 Tammi Michelle		lahn		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NEBRASI	KA	
Case number 2	21-80069			
(if known)				

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 11 of 40

		Document	Page 11	. 01 40	
Fill in this in	nformation to identify your	case:			
Debtor 1	Timothy William H	Hahn			
	First Name	Middle Name	Last Name		
Debtor 2	Tammi Michelle H				
(Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF NEBRASKA			
Case number	er <b>21-80069</b>				
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106E/F				
Schedul	e E/F: Creditors W	ho Have Unsecured	Claims		12/15
Schedule G: E Schedule D: C left. Attach the name and cas	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 106G). Doured by Property. If more space is need by Property. If more space is need. If you have no information to rep	o not include : leeded, copy t	any creditors with partially sed he Part you need, fill it out, nu	operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the pof any additional pages, write your
	reditors have priority unsecure				
	o to Part 2.	u ciainis against you!			
_	0 to Part 2.				
☐ Yes.					
Part 2: L	ist All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any c	reditors have nonpriority unsec	cured claims against you?			
□ No. Yo	ou have nothing to report in this pa	art. Submit this form to the court with y	our other sche	dules.	
Yes.	ou navo nou mig to roport in uno pr		, our ourer corre	uu.ss.	
unsecure	d claim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, st the other creditors in Part 3.If you h	identify what t	ype of claim it is. Do not list clain	ms already included in Part 1. If more
					Total claim
	lity Recovery Services L priority Creditor's Name	Last 4 digits of acco	ount number	00N1	\$1,667.00
	•			Opened 02/20 Last Ad	ctive
	o 4031 oming, PA 18644	When was the debt	incurred?	03/16	
Num	ber Street City State Zip Code incurred the debt? Check one.	As of the date you f	ile, the claim i	s: Check all that apply	
_	Debtor 1 only	Пол			
	-	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIOR	ITV upsocuros	l claim:	
_	at least one of the debtors and and		ii i unsecurec	i Ciaiiii.	
∐ C debt	check if this claim is for a comm	nunity	a out of a sons	ration agreement or divorce that	t you did not
	e claim subject to offset?	report as priority clair		ration agreement of divorce that	, you did flot
<b>■</b> N	lo	☐ Debts to pension	or profit-sharin	g plans, and other similar debts	
ПΥ	'es	Other. Specify	Collection A	Attorney Penn Foster	
		' ' ' -			

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 12 of 40

	r 1 Timothy William Hann r 2 Tammi Michelle Hahn		Case number (if known)	21-80069	
4.2	Capital One	Last 4 digits of account number	8107		\$741.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 02/20 Last 10/20	t Active	<b>4.11100</b>
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation</li></ul>	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement of divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	Other. Specify Credit Card	d		
	Coastal Credit/Westlake Portfolio				
4.3	Manage Nonpriority Creditor's Name	Last 4 digits of account number	6817		\$7,495.00
	Attn: Bankruptcy Po Box 76809	When was the debt incurred?	Opened 5/06/13 La 9/26/16	ast Active	
	Los Angeles, CA 90054  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	_				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans	u Ciaiii.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharir	na plane, and other cimilar de	ahte	
	Yes	Other. Specify Automobile		5013	
	Li Tes	Other. Specify Automobile			
4.4	Convergent Outsourcing, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	7148		\$741.00
	Attn: Bankruptcy Po Box 9004 Renton, WA 98057	When was the debt incurred?	Opened 05/17 Last 10/14	t Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	□ Yes	Other Specify Collection	Attorney Cox Commi	unications	
			<u> </u>		

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 13 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn		Case number (if known) 21-80069	
4.5	Convergent Outsourcing, Inc.	Last 4 digits of account number	7940	\$246.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9004 Renton, WA 98057	When was the debt incurred?	Opened 02/19 Last Active 05/17	•
ī	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	d Claim.	
	☐ Check if this claim is for a community debt sthe claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	· ·	Attorney Cox Communications	
	Enhanced Recovery Company	Last 4 digits of account number	9129	\$2,855.00
	Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256	When was the debt incurred?	Opened 07/19	
Ī	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
1	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
1	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
1	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
1	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	■ Other. Specify Collection	Attorney At T	
	Enhanced Recovery Company Nonpriority Creditor's Name	Last 4 digits of account number	0611	\$892.00
	Attn: Bankruptcy 8014 Bayberry Road	When was the debt incurred?	Opened 08/16	
ī	Jacksonville, FL 32256  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
•	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	■ Other. Specify Collection	Attorney Sprint	

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 14 of 40

	1 Timothy William Hahn 2 Tammi Michelle Hahn		Case number (if known)	21-80069		
4.8	First Premier Bank	Last 4 digits of account number	1592		\$438.00	
4.0	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 04/16 Lass 8/05/16	t Active	ψ <del>430.00</del>	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts		
	Yes	Other. Specify Credit Card	d			
4.9	HLS of Nevada/Right Size Funding Nonpriority Creditor's Name	Last 4 digits of account number	8612		\$5,971.00	
	Attn: Bankruptcy/Compliance Dept 7625 Dean Martin Dr Las Vegas, NV 89139	When was the debt incurred?	Opened 07/14 Las 12/12/14	t Active		
	Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
	■ No	Debts to pension or profit-sharir				
	Yes	■ Other. Specify Deficiency	= :			
4.1 0	HLS of Nevada/Right Size Funding Nonpriority Creditor's Name	Last 4 digits of account number	6900		\$3,869.00	
	Attn: Bankruptcy/Compliance Dept 7625 Dean Martin Dr Las Vegas, NV 89139	When was the debt incurred?	Opened 07/14 Las 12/12/14	t Active		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community ☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts		
	Yes	Other. Specify Deficiency	balance			

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 15 of 40

Debte	Tammi Michelle Hahn	Case number (if known) 21-80069			
4.1 1	HR Capital Resources	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name 15905 Double Eagle Trl Delray Beach, FL 33446	When was the debt incurred?	****		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Nebraska Medical Center		Unknown		
2	Nonpriority Creditor's Name	Last 4 digits of account number	Olikilowii		
	988140 Nebraska Medical Center Omaha, NE 68198	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Medical			
4.1	Omni Financial/OmniMilitaryLoans.com	Last 4 digits of account number 2013	\$7,172.00		
	Nonpriority Creditor's Name				
	Attn: Bankruptcy Po Box 81844 Las Vegas, NV 89180	When was the debt incurred?  Opened 05/13 Last Active 08/14			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only				
	•	☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Note Loan			

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 16 of 40

	1 Timothy William Hahn 2 Tammi Michelle Hahn	Case number (if known) 21-80069					
4.1 4	Pioneer Services Sales Finance	Last 4 digits of account number		\$5,112.35			
	Nonpriority Creditor's Name PO Box 10338	When was the debt incurred?					
	Kansas City, MO 64171  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.  Debtor 1 only						
	Debtor 2 only	☐ Contingent					
	_	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	Student loans					
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Lawsuits					
4.1 5	PlusFour, Inc.	Last 4 digits of account number	4243	\$372.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 95846	When was the debt incurred?	Opened 11/17 Last Active 11/14				
	Las Vegas, NV 89193  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	з. Спеск ан так арру				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collection	■ Other. Specify Collection Attorney Sunset Clinics				
4.1 6	UNMC	Last 4 digits of account number		Unknown			
	Nonpriority Creditor's Name 988095 Nebraska Medical Center Omaha, NE 68198-8095	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 17 of 40

	tor 1 Timothy William Hahn tor 2 Tammi Michelle Hahn		Case number (if known) 21-80069	
4.1 7	USDOE/GLELSI	Last 4 digits of account number	8581	\$23,716.00
	Nonpriority Creditor's Name  2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 10/13 Last Active 12/20	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	Student loans	r Claiiii.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of alvorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	I	
4.1	Utah Higher Education Assistance			
8	Authori	Last 4 digits of account number	0001	\$2,394.00
	Nonpriority Creditor's Name		Opened 04/00 Lest Active	
	Att: Bankruptcy Po Box 145110	When was the debt incurred?	Opened 04/09 Last Active 12/20	
	Salt Lake City, UT 84114			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Continuent		
	Debtor 1 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l .	
4.1 9	Utah Higher Education Assistance Authori	Last 4 digits of account number	0002	\$1,803.00
	Nonpriority Creditor's Name Po Box 510407 Salt Lake City, UT 84151	When was the debt incurred?	Opened 04/09 Last Active 12/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify	<del>-</del> ·	
	55	Educationa		

Part 3: List Others to Be Notified About a Debt That You Already Listed

## Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 18 of 40

Debtor 1 Timothy William Hahn

Debtor 2 Tammi Michelle Hahn Case number (if known) 21-80069

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 27,913.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
	Cl-	you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 37,571.35
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 65,484.35

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 19 of 40

Fill in this infor	mation to identify your	case:		
Debtor 1	Timothy William	Hahn		
	First Name	Middle Name	Last Name	
Debtor 2	Tammi Michelle H	Hahn		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEBRAS	KA	
Case number	21-80069			
(if known)				☐ Check if this is an
				amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				ontract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 20 of 40

		Ducume	ili raye 200	I <del>4</del> 0	
Fill in this inf	ormation to identify your	case:			
Debtor 1	Timothy William I	-lahn			
	First Name	Middle Name	Last Name		
Debtor 2	Tammi Michelle F	lahn			
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States	Bankruptcy Court for the:	DISTRICT OF NEBRAS	SKA		
Case number (if known)	21-80069				☐ Check if this is an
	Form 106H le H: Your Cod	ebtors			amended filing 12/15
our name an	number the entries in the d case number (if known)  u have any codebtors? (If	. Answer every question	ı.		o of any Additional Pages, write
	<b>the last 8 years, have you</b> California, Idaho, Louisiana,				y states and territories include
3. In Colum in line 2 a	id your spouse, former spound in 1, list all of your codebt again as a codebtor only i 5D), Schedule E/F (Official	ors. Do not include your f that person is a guarar	spouse as a codebtor	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
Col	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 Nam	ne			_ ☐ Schedule D, lind☐ Schedule E/F, I☐ Schedule G, lind☐ Schedule	ine
Num City		State	ZIP Code	_	
3.2 Nam	ne			_ ☐ Schedule D, lin-☐ Schedule E/F, I☐ Schedule G, lin-☐	ine
Num City		State	ZIP Code	_	

Fill in	this information to id	antifu vous o					ı			
Debto	this information to identify the transfer of t	mothy Will								
Debto (Spouse		ammi Mich								
	-	Court for the	DISTRICT OF NEBRA	ASKA						
Case (If know	number <b>21-800</b>	069				_	☐ An	if this is: amended	_	g postpetition chapter
Offi	icial Form 10	D6I					13 i		s of the fo	llowing date:
Sch	nedule I: Yo	ur Inco	ome				IVIIVI	1/00/11	' '	12/1
spous	e. If you are separa a separate sheet to	ted and you this form. (	are married and not filing wing spouse is not filing wing wing the top of any addition	th you, do not include	de infor	matio	on about y	our spou	ıse. If mo	re space is needed,
	Fill in your employm nformation.	ent		Debtor 1			C	Debtor 2	or non-fil	ing spouse
	you have more than one job, tach a separate page with		Employment status	■ Employed				■ Employ	/ed	
iı	nformation about add employers.			☐ Not employed			[	☐ Not em	ployed	
li	nclude part-time, sea self-employed work.	sonal, or	Occupation Employer's name	Mike's Metro Lock & Safe, Inc.						
C	Occupation may incluor homemaker, if it ap		Employer's address	305 NE 72nd Str Des Moines, IA						
			How long employed the	nere?				_		
Part 2	Give Details	About Mon	thly Income							
	ate monthly income e unless you are sepa		ate you file this form. If y	you have nothing to re	eport for	any l	line, write \$	0 in the s	pace. Incl	lude your non-filing
	or your non-filing spo space, attach a separ		ore than one employer, co	ombine the information	n for all	emplo	oyers for the	at person	on the lin	ies below. If you need
							For Debto	or 1		otor 2 or ng spouse
			ry, and commissions (becalculate what the month)		2.	\$	3,7	14.47	\$	0.00
3. <b>E</b>	Estimate and list mo	onthly overti	me pay.		3.	+\$		0.00	+\$	0.00

3,714.47

0.00

Calculate gross Income. Add line 2 + line 3.

Deb Deb	tor 1 tor 2	Timothy William Hahn Tammi Michelle Hahn	_		Cas	e number ( <i>if known</i> )	2	1-80069		
	0	without home	4			or Debtor 1		For Debtor	spouse	
	Сор	y line 4 here	4.	•	\$_	3,714.47		<i></i>	0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	422.02	9	\$	0.00	
	5b.	Mandatory contributions for retirement plans	51	b.	\$	0.00		\$	0.00	=
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.00		\$	0.00	-
	5d.	Required repayments of retirement fund loans		d.	\$_	0.00	- '	\$	0.00	_
	5e.	Insurance		e.	\$_	0.00		\$	0.00	
	5f.	Domestic support obligations	5f		\$_	0.00		\$	0.00	-
	5g.	Union dues Other deductions, Specific	5 <u>(</u>	-	\$ \$	0.00	. '	\$	0.00	-
_	5h.	Other deductions. Specify:	_	h.+	· -	0.00		·	0.00	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	422.02	-	\$	0.00	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$_	3,292.45		\$	0.00	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0,	a.	\$	0.00		\$	0.00	
	8b.	monthly net income.  Interest and dividends		a. b.	\$ \$	0.00	-	\$ \$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_ \$	0.00			0.00	-
	8d.	Unemployment compensation	80	d.	\$	0.00	. (	\$	0.00	-
	8e.	Social Security	86	e.	\$	0.00		\$	0.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f		\$_	0.00		·	0.00	_
	8g.	Pension or retirement income	89		\$_	0.00	. '	\$	0.00	-
	8h.	Other monthly income. Specify: VA disability	_ 81	h.+	\$_	790.77	+ {	ه <u> </u>	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [	\$	790.77	9	\$	0.00	D
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		4,083.22 + \$		0.00	= \$	4,083.22
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ.		4,000.22 · · ·		0.00		+,000.EE
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a	dep			•				0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	4,083.22
13.	Doy	ou expect an increase or decrease within the year after you file this form	?						Combir monthl	ned y income
		No. Yes. Explain:								

						•		
Fill	in this informa	ition to identify yo	our case:					
Deb	otor 1	Timothy Will	iam Hah	n			k if this is:	
	otor 2 ouse, if filing)	Tammi Mich	elle Hahr	1				ving postpetition chapter the following date:
Unit	ted States Bankr	ruptcy Court for the	: DISTRI	CT OF NEBRASKA		-	MM / DD / YYYY	
Cas	se number 21	1-80069						
	nown)							
Of	fficial Fo	orm 106J						
S	chedule	J: Your l	Exper	ises				12/15
Be info	as complete ormation. If m	and accurate as	possible.	. If two married people ar ch another sheet to this				or supplying correct
Par		ribe Your House	hold					
1.	Is this a joir  ☐ No. Go to							
	_	s Debtor 2 live i	in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		10	Yes
					Son		14	□ No ■ Yes
								□ No
								☐ Yes
								□ No
3.	Do vour ext	oenses include	_	NI.	-			☐ Yes
O.	expenses o	f people other the dependent	han $_{m \Box}$	No Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the	lude expense value of sucl ficial Form 10	h assistance and	non-cash d have ind	government assistance i luded it on <i>Schedule I:</i> \	f you know our Income		Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		760.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4а. э 4b. \$		0.00
				ıpkeep expenses		4c. \$		0.00
F		owner's associat			and a substitute of the second	4d. \$		0.00
5.	Additional r	nortgage payme	ents for yo	<b>our residence</b> , such as ho	me equity loans	5. \$		0.00

	nothy William Hahn nmi Michelle Hahn	Case num	ber (if known)	21-80069
Utilities:				
6a. Elec	ctricity, heat, natural gas	6a.	\$	300.00
6b. Wa	er, sewer, garbage collection	6b.	\$	0.00
6c. Tele	ephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d. Oth	er. Specify:	6d.	\$	0.00
Food and	housekeeping supplies	7.	\$	800.00
Childcare	and children's education costs	8.	\$	200.00
Clothing,	laundry, and dry cleaning	9.	\$	200.00
Personal	care products and services	10.	\$	150.00
Medical a	nd dental expenses	11.	\$	200.00
Transpor	tation. Include gas, maintenance, bus or train fare.		_	050.00
	lude car payments.	12.	·	250.00
	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	e contributions and religious donations	14.	\$	0.00
Insurance				
	lude insurance deducted from your pay or included in lines 4 or 20.	4=	Φ.	
	insurance	15a.	·	0.00
	Ith insurance	15b.		0.00
	icle insurance	15c.	\$	215.00
	er insurance. Specify:	15d.	\$	0.00
	onot include taxes deducted from your pay or included in lines 4 or 20. <b>Vehicle registration/taxes</b>	16.	\$	15.00
	nt or lease payments:		-	
	payments for Vehicle 1	17a.	\$	300.00
17b. Car	payments for Vehicle 2	17b.	\$	0.00
	er. Specify:	17c.	\$	0.00
	er. Specify:	17d.	\$	0.00
Your pay	ments of alimony, maintenance, and support that you did not repor from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
	ments you make to support others who do not live with you.	oi)	\$	0.00
Specify:	ments you make to support others who do not live with you.	19.	Ψ	0.00
	I property expenses not included in lines 4 or 5 of this form or on S		our Income	
	tgages on other property	20a.		0.00
	Il estate taxes	20b.	· ·	0.00
	perty, homeowner's, or renter's insurance	20c.	· ·	0.00
	ntenance, repair, and upkeep expenses	20d.		0.00
	neowner's association or condominium dues	20a.	·	0.00
Other: Sp		206.	· ·	
			· <u> </u>	50.00
VA INCO	ne not for the benefit of creditors		+\$	240.00
Calculate	your monthly expenses			
	ines 4 through 21.		\$	4,080.00
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	l-2	\$	,,
	ine 22a and 22b. The result is your monthly expenses.		\$	4,080.00
	, , ,		Ψ	4,000.00
	your monthly net income.			
23a. Cop	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,083.22
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	4,080.00
				· ·
	tract your monthly expenses from your monthly income.		<u></u>	2.00
The	result is your monthly net income.	23c.	\$	3.22

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: Debtors are paying for vehicle payment listed above on 17a. Car is listed on schedule b. Loan for same is only in debtor's brother's name.

	Timothy William I	Hahn		
	First Name	Middle Name	Last Name	
Debtor 2	Tammi Michelle H	lahn		
(Spouse if, filing)	First Name	Middle Name	Last Name	
(if known)				Check if this is an amended filing

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

\$	Sign Below			
Did you	pay or agree to pay someone who is NO	OT an attorney to help	you fill	out bankruptcy forms?
■ No				
☐ Yes	s. Name of person			Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
that they  X /s/ 1  Tim	enalty of perjury, I declare that I have rea or are true and correct. Fimothy William Hahn othy William Hahn ature of Debtor 1	·	/s/ Tai	nmi Michelle Hahn i Michelle Hahn re of Debtor 2
Date	February 3. 2021		Date	February 3, 2021

Fill	in this info	rmation to identify you	r case:			
Deb	tor 1	Timothy William	Hahn			
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	Tammi Michelle First Name	Hahn Middle Name	Last Name		
		ankruptcy Court for the:	DISTRICT OF NEBRASK			
Offic	eu States D	ankruptcy Court for the.	DISTRICT OF NEBRASK	<u> </u>		
Cas (if kno		21-80069			_	heck if this is an nended filing
Sta Be a	atemen s complete	and accurate as possi		re filing together, both are	equally responsible for supp	
		more space is needed, vn). Answer every ques		this form. On the top of an	/ additional pages, write you	r name and case
Part	1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is yo	ur current marital statu	s?			
	■ Marrie					
2.	During the	last 3 years, have you	lived anywhere other than v	where vou live now?		
	■ No □ Yes. L	ist all of the places you li	ived in the last 3 years. Do no	ot include where you live now	٠.	
	Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. M	Make sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	Expl	ain the Sources of You	r Income			
	Fill in the to	tal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	ill businesses, including part-		dar years?
	□ No ■ Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,420.40	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 27 of 40

Debtor 1 Debtor 2		nothy Will mmi Mich	iam Hahn elle Hahn				с	ase r	number (if known)	21-80069	
				Debtor 1					Debtor 2		
				Sources of Check all the		(befo	es income are deductions and asions)	i	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		dar year: December	31, 2020 )	■ Wages, bonuses, ti	commissions, ps		\$48,759.00		☐ Wages, combonuses, tips	missions,	\$0.00
				☐ Operatir	ng a business				☐ Operating a	business	
		dar year be December		■ Wages, bonuses, ti	commissions,		\$22,986.00		☐ Wages, com bonuses, tips	missions,	\$0.00
				☐ Operatir	ng a business				☐ Operating a	business	
	each s	•	he gross inco	•	·		ived together, list		•		
				Debtor 1					Debtor 2		
				Sources of Describe be		each (befo	s income from source are deductions and asions)	i	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Befor	e You Filed for	Bankru	ptcy				
6. Are □	No.	Neither Do individual puring the No. Yes	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include to adjustment	personal, far personal, far pre you filed for each creditor editor. Do no payments to t on 4/01/22 a	mily, or househo or bankruptcy, di to whom you pai t include paymer an attorney for ti	umer de Id purpo id you pa id a total nts for do his bank is after th	bts. Consumer de se."  ay any creditor a to of \$6,825* or more omestic support ob ruptcy case.  nat for cases filed of	otal o re in o	one or more payions, such as ch	re? rments and thid support a	1(8) as "incurred by an ne total amount you nd alimony. Also, do
•	Yes.				•		ots. ay any creditor a to	otal o	f \$600 or more?		
		No.	Go to line 7								
		□ Yes	include pay		mestic support o		of \$600 or more a s, such as child so			•	creditor. Do not nclude payments to an
Cre	editor'	s Name and	d Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for
							paiu		Juli OME		

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 28 of 40

Debtor 1 Timothy William Hahn

Del	otor 2 Tammi Michelle Hahn		Cas	e number (if known)	21-80069		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general post which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any general control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you g securities; and an	u are a general ny managing ag	l partner; corporations gent, including one for	
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on ac	count of a de	bt that benefited an	
	■ No □ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment	
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	pulu			tor o riamo	
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.   No						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	e case	
	Red Credit Solutions vs Timothy W. Hahn Cl20-15319	Collection	Douglas Count 1819 Farnam S Omaha, NE 681	t F9	☐ Pending ☐ On appea ☐ Conclude		
					SATISFIED	)	
	Pioneer Services Sales Finance vs Timothy Hahn Cl16-13731	Collection	Douglas Count 1819 Farnam S Omaha, NE 681	t F9	☐ Pending ☐ On appeal ☐ Concluded		
	Pioneer Services Sales Finance vs Timothy Hahn Cl16-13730	Collection	Douglas Count 1819 Farnam S Omaha, NE 681	t F9	☐ Pending ☐ On appea ☐ Conclude		
10.	Check all that apply and fill in the details belo  No. Go to line 11.		erty repossessed, f	oreclosed, garnisl	hed, attached	, seized, or levied?	
	Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	l			property	
	Red Credit Solutions LLC 6910 Pacific Street, Ste. 425	Wages garnished		Dece 2020	mber,	\$459.01	
	Omaha, NE 68106	☐ Property was reposse☐ Property was foreclos☐ Property was garnishe	ed.	2020			
		☐ Property was attached					

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 29 of 40

	otor 1 Timothy William Hahn otor 2 Tammi Michelle Hahn	Case numbe	er (if known) 21-80069	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment become No	ptcy, did any creditor, including a bank or financial in ause you owed a debt?	nstitution, set off any a	mounts from your
	Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a	cy, was any of your property in the possession of an mother official?	assignee for the bene	fit of creditors, a
	■ No □ Yes			
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gifts with a total value of more	than \$600 per person?	•
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift or cor	otcy, did you give any gifts or contributions with a to-	tal value of more than \$	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did you lose an	ything because of theft	t, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
		nsurance claims on line 33 of Schedule A/B: Property.		
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pr	cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? eparers, or credit counseling agencies for services requires.		ty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Yo	transferred	or transfer was made	payment
	Gamm Legal Services, LLC 11550 West Dodge Road Omaha, NE 68154 chris@gammlaw.us	Pre-Petition Payment of \$175 less filing fee of \$75 and credit check of \$74.  Debtor and counsel entered into two, separate fee agreements for pre- and post-petition work.		\$26.00

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 30 of 40

**Timothy William Hahn** 21-80069 Debtor 2 **Tammi Michelle Hahn** Case number (if known) 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? п Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No ☐ Yes. Fill in the details.

Who else has or had access

Address (Number, Street, City,

State and ZIP Code)

to it?

Describe the contents

Address (Number, Street, City, State and ZIP Code)

Name of Storage Facility

Do you still

have it?

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Page 31 of 40 Document **Timothy William Hahn** 21-80069 Debtor 2 **Tammi Michelle Hahn** Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City,

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership

An officer, director, or managing executive of a corporation

An owner of at least 5% of the voting or equity securities of a corporation

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Page 32 of 40 Document **Timothy William Hahn** Case number (if known) 21-80069 Tammi Michelle Hahn Debtor 2 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

	s/ Timothy William Hahn imothy William Hahn		/s/ Tammi Michelle Hahn						
Timo	thy William Hahn	li li	Tammi Michelle Hahn						
Signa	Signature of Debtor 1			ure of Debtor 2					
Date	February 3, 2021	Da	ate	February 3, 2021					
Did yo	u attach additional pa	ges to Your Statement of Finan	cial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					
■ No									
☐ Yes									
Did yo	u pay or agree to pay	someone who is not an attorne	y to h	elp you fill out bankruptcy forms?					
■ No									
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition	Prep	arer's Notice, Declaration, and Signature (Official Form 119).					

## Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 33 of 40

Fill in this inform	mation to identify your			
Debtor 1	Timothy William I	Hahn		
	First Name	Middle Name	Last Name	
Debtor 2	Tammi Michelle F	lahn		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEBRASKA	A	
Case number	21-80069			
(if known)				Check if this is an amended filing

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name.	Retain the property and redeem it.	□Yes
Description of	Retain the property and enter into a Reaffirmation Agreement.	<b>-</b> 165
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 34 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn	Case number (if known)	21-80069
name:		☐ Retain the property and redeem it.	☐ Yes
		☐ Retain the property and enter into a	<b>1</b> 100
Descrip	otion of	Reaffirmation Agreement.	
propert	•	☐ Retain the property and [explain]:	
securin	ng debt:		-
Part 2:	List Your Unexpired Personal Property Lea	ises	
For any u	nexpired personal property lease that you li ormation below. Do not list real estate leases	sted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r	name:		□ No
	on of leased		_
Property:			☐ Yes
Lessor's r	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's r	name:		□ No
_ '	on of leased		
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on on leased		☐ Yes
Lessor's r			□ No
	on of leased		
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicate	ed my intention about any property of my estate that sec	ures a debt and any personal
	hat is subject to an unexpired lease.		• •
	Timothy William Hahn	X /s/ Tammi Michelle Hahn	
	othy William Hahn ature of Debtor 1	<b>Tammi Michelle Hahn</b> Signature of Debtor 2	
Sign	ature of Deptor 1	Signature of Debtor 2	
Date	February 3, 2021	Date February 3, 2021	

Official Form 108

Fill in this inforr	Fill in this information to identify your case:			
Debtor 1	Timothy William Hahn			
Debtor 2 (Spouse, if filing)	Tammi Michelle Hahi	1		
United States Bankruptcy Court for the: District of Nebraska				
Case number (if known)	21-80069			

Check one box	only as	directed	in	this	form	and	in	Form
122A-1Supp:								

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

#### Official Form 122A - 1

## **Chapter 7 Statement of Your Current Monthly Income**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Debto	or 1	Debtor non-fili	2 or ing spouse
2	. Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissi	ons (before all	\$	3,560.49	\$	0.00
3	. <b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00
4	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regula d, your depende	r contributions ents, parents,	\$	0.00	\$	0.00
5	. Net income from operating a business, profession,	or farm					
		Del	btor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or far	m \$ <b>0.00</b>	Copy here ->	\$	0.00	\$	0.00
6	Net income from rental and other real property		-				
		Del	btor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	_				
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00
7	Interest, dividends, and royalties		_	\$	0.00	\$	0.00
Ι΄							

# Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 36 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn			Case number	(if known)	21-80069		
				Column A Debtor 1		Column B Debtor 2 or		
8. <b>Un</b>	employment compensation			\$	0.00	\$	0.00	
	not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	t received was a benefit	under					
	For you\$	0.0	0					
F	For your spouse \$	0.0	0					
ber not Uni dis: pay doe if re	nsion or retirement income. Do not include any armefit under the Social Security Act. Also, except as so include any compensation, pension, pay, annuity, conted States Government in connection with a disability, or death of a member of the uniformed service paid under chapter 61 of title 10, then include that eas not exceed the amount of retired pay to which you externed under any provision of title 10 other than chapter from all other sources not listed above.	tated in the next senten or allowance paid by the ty, combat-related injuryces. If you received any pay only to the extent the would otherwise be enter 61 of that title.	ce, do  or  retired  at it titled	\$	0.00	\$	0.00	
Do und cor crir cor Go dea	not include any benefits received under the Social of the Federal law relating to the national emergencier the National Emergencies Act (50 U.S.C. 1601 conavirus disease 2019 (COVID-19); payments receive, a crime against humanity, or international or dorn pensation pension, pay, annuity, or allowance paivernment in connection with a disability, combat-relation of a member of the uniformed services. If necessionarate page and put the total below.	Security Act; payments a cy declared by the Presist seq.) with respect to the fived as a victim of a wall nestic terrorism; or d by the United States ated injury or disability, a carry, list other sources of	made dent ne	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Iculate your total current monthly income. Add linch column. Then add the total for Column A to the total for Column B tota	tal for Column B.	\$3	3,560.49	<b>+</b> \$	0.00		3,560.49
12 <b>Ca</b>	- Iculate your current monthly income for the year	Eollow those stops:						
	a. Copy your total current monthly income from line	•		Сору	line 11 h	ere=>	\$	3,560.49
	Multiply by 12 (the number of months in a year)						<b>x</b> 1	
12k	b. The result is your annual income for this part of the	e form				12b	. \$ <b>4</b>	2,725.88
13. <b>Ca</b>	culate the median family income that applies to	you. Follow these steps	s:					
Fill	in the state in which you live.	NE						
Fill	in the number of people in your household.	4						
To	in the median family income for your state and size find a list of applicable median income amounts, go this form. This list may also be available at the bank	online using the link sp	ecified i	n the separa	te instruct	13. ions	\$9	6,749.00
14. <b>Ho</b>	w do the lines compare?							
148	<ul> <li>Line 12b is less than or equal to line 13. C</li> <li>Go to Part 3. Do NOT fill out or file Official</li> </ul>		eck box	1, There is r	no presum	ption of abus	e.	
14k	Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2,	The pre	sumption of	abuse is d	determined by	/ Form 12	2A-2.
Part 3:	Sign Below							
	By signing here, I declare under penalty of perjury				-	chments is tr	ue and co	rrect.
	X /s/ Timothy William Hahn	X _/s	/ Tamr	ni Michelle	Hahn			

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 37 of 40

Debtor 1 Debtor 2	Timothy William Hahn Tammi Michelle Hahn	Case number (if known) 21-80069	
	Timothy William Hahn Signature of Debtor 1	Tammi Michelle Hahn Signature of Debtor 2	
Da	te February 3, 2021	Date February 3, 2021	
	MM/DD/YYYY	MM / DD / YYYY	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 38 of 40

Debtor 1 Debtor 2 Timothy William Hahn
Tammi Michelle Hahn

Case number (if known)

21-80069

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2020 to 12/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Mike's Metro Lock & Safe Inc.

Income by Month:

6 Months Ago:	07/2020	\$3,128.61
5 Months Ago:	08/2020	\$3,108.32
4 Months Ago:	09/2020	\$3,196.28
3 Months Ago:	10/2020	\$4,858.01
2 Months Ago:	11/2020	\$3,462.10
Last Month:	12/2020	\$3,609.60
	Average per month:	\$3,560.49

Non-CMI - VA Income

Source of Income: **VA disability** Constant income of **\$790.77** per month.

#### Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Page 39 of 40 Document

#### **United States Bankruptcy Court District of Nebraska**

	Timothy William Hahn			
In re	Tammi Michelle Hahn		Case No.	20-80069
		Debtor(s)	Chapter	7

	Tallilli Michele Halli			
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	2,100.00
	Prior to the filing of this statement I have received			175.00
	Balance Due			1,925.00
2.	. The source of the compensation paid to me was:			
	✓ Debtor			
3.	. The source of compensation to be paid to me is:			
	✓ Debtor			
4.	. I have not agreed to share the above-disclosed compe	nsation with any other person	n unless they are mem	bers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name			
5.	. In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspec	cts of the bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering between the preparation and filing of any petition, schedules, stater control of the debtor at the meeting of creditor dots. [Other provisions as needed]         Negotiations with secured creditors to represent the reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour     </li> </ul>	ment of affairs and plan which s and confirmation hearing, a duce to market value; ex s as needed; preparatio	th may be required; and any adjourned hea cemption planning;	rings thereof; preparation and filing of
б.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discount any other adversary proceeding.			es, relief from stay actions or
7.	. The fees described above include the filing fee.			
8.	Counsel offered debtor(s) two options for the payment bankruptcy petition being filed, or (2) bifurcate the a	ttorney services into pre-	and post-petition wo	ork in order to facilitate the

- debtor(s) obtaining the benefit of being filed right away and making payments post-petition for the post-petition work. Counsel charges a higher fee for the second option. There are a number of reasons for charging a higher fee:
  - Counsel performs additional work to split the engagement;
  - b. Counsel takes on risk by allowing the debtor to pay the attorney fee over time instead of collecting the entire fee up front;
  - The option provides the debtor(s) with the benefit of a quicker filing than if the debtor(s) had to come up with the money to pay in advance;
  - The option gives debtor(s) an opportunity to begin rebuilding their credit score by making timely payments toward the attorney fee;
  - Counsel will not charge the debtor additional fees for certain services that if required would otherwise cost the debtor(s) more if debtor(s) had paid the entire fee before the case was filed.

This higher fee nonetheless satisfies the reasonability requirement under Section 329 applying the Lodestar analysis. The additional cost was fully disclosed to debtor(s) and debtor(s) chose the second option.

#### Case 21-80069-BSK Doc 10 Filed 02/04/21 Entered 02/04/21 12:24:01 Desc Main Document Page 40 of 40

- Debtor and counsel entered into two, separate fee agreements for pre- and post-petition work.
  - The first, pre-petition fee agreement was signed prior to the filing of the petition for the preparation and filing of the bankruptcy petition, statement about social security number, creditor list and other documents required at the time of filing; and review, analysis and advisement of the typical matters that are required to be performed prior to filing by a bankruptcy attorney under the applicable bankruptcy and ethical rules. Counsel's fees paid under the first fee agreement (if any) are shown in Section 1 above as "Prior to the filing of this statement I have received", and any fees earned but not paid for the pre-petition work were waived by counsel.
  - b. The second, post-petition fee agreement was signed after the petition was filed for post-petition work to be performed, including the preparation of schedules of assets and liabilities, and statement of financial affairs; preparation and filing of other required documents; representation at the first meeting of creditors; and other services outlined in the fee agreement. Counsel's fees owed by debtor under the second fee agreement for post-petition work are reflected in Section 1 above as the Balance Due. The second fee agreement allows the debtor(s) to pay these post-petition fees and costs in installments over 12 months following the bankruptcy filing.
- 10. Counsel has fully informed debtor(s) and obtained their informed consent to the bifurcation of services.

	CERTIFICATION
I certify that the foregoing is a complete this bankruptcy proceeding.	statement of any agreement or arrangement for payment to me for representation of the debtor(s) in
February 3, 2021	/s/ Christopher Gamm

Date

**Christopher Gamm** Signature of Attorney Gamm Legal Services, LLC 11550 West Dodge Road Omaha, NE 68154 402-659-4254 Fax: 402-975-6025 chris@gammlaw.us

Name of law firm